## **DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)**

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CONNECTOR PREVENTIVE OF INCOMPLETE FITTING

the application of which			
is attached hereto	OR	☐ was filed on	plication Number
I hereby state that I have reviewed a by any amendment specifically referre	nd understand the old to above.	contents of the above identi	fied application, including the claims, as amended
	naterial information	which became available b	tility as defined in 37 CFR 1.56, including for etween the filing date of the prior application and
or plant breeder's rights certificate(s)	), or 365(a) of any	PCT international applicati	of any foreign application(s) for patent, inventor's ion(s) which designated at least one country other y checking the box, any foreign application(s) for

			Priority Claimed	
Prior Foreign Application Number(s)	Country	Foreign Filing Date	Yes	No
P2003-8329	Japan	16/January/2003	X	

patent, inventor's or plant breeder's rights certificate(s), or any PCT international application(s) having a filing date before that of the

I hereby claim domestic priority benefits under 35 United States Code §120 of any United States application(s), §119(e) of any United States provisional application(s), or §365(c) of any PCT International application(s) designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in a listed prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge my duty to disclose any information material to the patentability of this application as defined in 37 C.F.R. 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U.S. or International Application Number(s)

application on which priority is claimed.

U.S. or International Filing Date

Status

I hereby appoint all attorneys of **SUGHRUE MION**, **PLLC** who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.

23373

PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:								
Given Name (first and middle [if any])  Tomomi Family Name or Surname  Endo								
Inventor's Signature	Formani E	ndo	Date I	December 22, 2003				
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Mailing Address:								
NAME OF SECOND INVENTOR	:			· - · · · · · · · · · · · · · · · · · ·				
Given Name			•					
(first and middle [if any])		Family Name or Surname						
Inventor's Signature		Date		T				
Residence: City	State	Country		Citizenship				
Mailing Address:								
NAME OF THIRD INVENTOR:		· ·						
Given Name (first and middle [if any])		   Family Name or Surnam	Family Name on Comment					
(instanta madre [n any])		Tailing Ivanie of Surffair	Ī					
Inventor's Signature			Date					
Residence: City	State	Country		Citizenship				
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NAME OF FOURTH INVENTOR	:							
Given Name (first and middle (if anyl))		Family Name or Suman						
(first and middle [if any]) Family Name or Surname								
Inventor's Signature	,	·	Date					
Residence: City	State	Country		Citizenship				
Mailing Address:								
				-				
NAME OF FIFTH INVENTOR:								
Given Name (first and middle [if any])  Family Name or Surname								
Inventor's Signature			Date					
Residence: City	State	Country		Citizenship				
Mailing Address:								